



Please type a plus sign (+) inside this box → +

HDP/SB/21 based on PTO/SB/21 (08-00)

Rae
Jewell

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/766,211
Filing Date	January 29, 2004
Inventor(s)	Kang Soo SEO et al.
Group Art Unit	2621
Examiner Name	Heather Rae Jones
Attorney Docket Number	46500-000578/US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Letter to the Official Draftsperson and _____ Sheets of Formal Drawing(s)	<input type="checkbox"/> LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/clean version of pending claims)
<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Notice of Appeal, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	PTO Form 1449 Request for Continued Examination
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

Mailstop: AF

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Gary D. Yacura	Reg. No. 35,416
Signature			
Date	March 1, 2010		

GDY/JBS:gew

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL
for FY 2009**

Effective 2/8/2006. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 810**Complete If Known**

Application Number	10/766,211
Filing Date	January 29, 2004
First Named Inventor	Kang Soo SEO et al
Examiner Name	Heather Rae Jones
Art Unit	2621
Attorney Docket No.	46500-00578/US

METHOD OF PAYMENT (check all that apply)
 Check Credit card Money Other None
 Order
 Deposit Account:
 Deposit Account Number **08-0750**

 Deposit Account Name **Harness, Dickey & Pierce, P.L.C.**
The Director is authorized to: (check all that apply)

-
- Charge fee(s) indicated below
-
- Credit any overpayments
-
-
- Charge any additional fee(s) during the pendency of this application
-
-
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	130	2251	65
1252	490	2252	245
1253	1,110	2253	555
1254	1,730	2254	865
1255	2,350	2255	1,175
1401	540	2401	270
1402	540	2402	270
1403	1,080	2403	540
1452	540	2452	270
1453	1,620	2453	810
1462	400	1462	400
1463	200	1463	200
1464	130	1464	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	810	2809	405
1810	810	2810	405
1801	810	2801	405
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$810)
4. SEARCH/EXAMINATION FEES			
1111	540	2111	270
1112	100	2112	50
1113	330	2113	165
1114	540	2114	270
1311	220	2311	110
1312	140	2312	70
1313	170	2313	85
1314	650	2314	325
SUBTOTAL (4) (\$0)			

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Gary D. Yagura	Registration No. (Attorney/Agent)	35,416	Telephone	703-668-8000
Signature	<i>Gary D. Yagura</i>	No. 621088		Date	March 1, 2010

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.